•	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.				FILING DATE		
								APPLICANT(S)						
			APTER 18Y		AFTER 2HD		CLAIMS	T	F		F			
	 	nLED		OMENT		DEP			BHD.	DEP	MD	DEP	BHD.	
01	IND .	DEP	ND_	DEP	BID.	- 00	1	51		1	<u> </u>	,	1	
2.				-				52		1				
) 3 ·							•	53				ļ	!	
4							ŀ	54		<u> </u>	 	ļ	 	<u> </u>
5		11					}	55		 	}	 	}	├
6	 	'' , •					1	56 57		_/	 -		 	-
7 .		 						58	·		l		i	
9		 					1	59					1	
10		1						60						
11								61					 	<u> </u>
12]							62			 	 	 	
13		 						63			 	 	 	
14	ļ	 						64 65				 	!	-
15 16	}	 	,					66						
17	 	 						67						
18								68			<u> </u>		ļ	
19								69				 	}	<u> </u>
20	ļ							70	ļ			 		
21	ļ	 						71 72				 	 	-
22		 						73				 	1	-
23 24	 	├──[╏]╷╏						74						
25		7-3/-						75						
26		1						76	<u> </u>					<u> </u>
27			•		·			77			 	 	 	├
28		,						78				 		-
29		 						79 80				 	 	
30 31	 	 			<u> </u>			81						
32								82						\Box
33		1						83				ļ	<u> </u>	
34		1						84			 	 	 	-
35								85						\vdash
36		1				<u>_</u>	. .	86 87			1	 	1	1
37	 	╎╵╷╶╸ ╏						88						
38 39	}	 -',- 						89						
40		'						90					 	
41_							1	91		ļ	 	 	 	\vdash
42		1			<u> </u>		}	92		 	 	 	 	H
43	ļ						ļ	93 94				1	 	1
44	 	 , 						95			1			
45 46		1						. 96						
47	 	 			L			97						\vdash
48		1, 1						98				ļ	1	<u> </u>
49								99			<u> </u>	 	 	├
50					ļ <i>:</i>			100			 	 	 	 -
TAL IND.	2					1		TOTAL IND.		! !		J 📘	<u></u>	J
TAK	1-	<u></u>	4	 †	•	و	i	TOTAL DEP.	-	7		 ▼	1	(5000000
P. TAL AIMS	53							TOTAL CLAIMS		100	l	1.00		